Public Forum PowerPoint Presentation

May 25, 2011
May 31, 2011
June 2, 2011
June 6, 2011
This presentation was given before public audiences on May 25, May 31, June 2 and June 6, 2011. It was narrated by OPWDD Commissioner Courtney Burke, Deputy Commissioner Jim Moran and OPWDD 1115 Waiver Unit Director Kate Marlay. The presentation describes the goals and process of New York State’s People First Waiver initiative.

Commissioner Burke recently ended a statewide listening tour in which she met with individuals with developmental disabilities and family members and listened as they told her what changes they would like to see in the service system.

Today’s public forum is an opportunity for OPWDD to review the goals of the People First Waiver and receive your input on these objectives.
The People First Waiver will continue to build on OPWDD’s current vision for all people with developmental disabilities to enjoy meaningful relationships with friends, family and others in their lives, experience personal health and growth, live in a home of their choice, and fully participate in their communities.

The People First Waiver must continue to support and build upon these core values and outcomes for people with developmental disabilities.

Why do we need change?

New York State’s system of community-based supports and services for people with developmental disabilities has been incredibly successful at helping people live richer lives in their communities, but has grown increasingly complex over the last 30+ years. Our fiscal and administrative infrastructure is still tied to the institutional past.

The image of this road map with arrows in all directions displays how people often feel as they navigate our system.
With a system that includes over 600 not-for-profit agencies, 120 billing categories, 5,318 different rates and over 13.5 million Medicaid transactions each year – our system is also currently very complex and inefficient to administer.

Surely there must be a better way.

Through the People First Waiver, we envision a system of supports and services characterized by improved:

- coordination of comprehensive care for individuals who require services from more than one system,
- person-centered planning and personal outcomes, and
- greater access, choice and flexibility in service delivery that allows services to respond to individuals’ needs with appropriate, individualized levels of care.

The waiver will allow New York State to demonstrate that these system improvements will result in more efficient use of Medicaid funds.
A waiver, as the term suggests, is authority to waive certain Medicaid rules or requirements and still receive Medicaid funding for services. To receive this authority, a state must submit a detailed application to CMS describing how the system will meet federal Medicaid objectives and maintain budget neutrality. Budget neutrality means that the 1115 waiver cannot increase cost to the federal government.

An 1115 Research & Demonstration Waiver is a waiver that allows the state to continue receiving federal Medicaid funds for services while it designs and implements system improvements. This kind of waiver provides flexibility to states to develop innovative service systems that otherwise would not be possible under standard Medicaid rules.

An 1115 waiver requires the state to demonstrate the benefits of the designed improvements through a carefully constructed evaluation. CMS must approve the final application and an implementation plan before a state may proceed to implement the plans described in its application.

The waiver is a tremendous opportunity to redesign the system, and it is important to clarify what the People First Waiver is and is not.
New York State outlined its vision for the People First Waiver in a concept paper that was submitted to the federal Centers for Medicare & Medicaid Services (CMS) in April 2011. The concept paper (which is available on the People First Waiver Web page at http://www.opwdd.ny.gov/2011_waiver/index.jsp) outlined several principles that will guide the development of the waiver.

These principles define how the waiver will fulfill New York State's commitment to supporting individuals with developmental disabilities and their families, and include:

- Respect for individuals and families;
- Care coordination that helps an individual to receive all the supports they need to live as independently as possible; and
- Realigned incentives that will ensure that funds are more clearly tied to services to individuals’ needs and the positive outcomes they desire.

The People First Waiver will result in a service delivery system that provides comprehensive care to each individual.

This comprehensive system will encompass OPWDD’s traditional long-term care services (those currently provided through the 1915c waiver) plus Medicaid services related to acute and chronic health care, behavioral health care and addiction services.

Coordinating all of an individual’s services through a person-centered service plan will support improved planning and delivery of all of the services an individual needs.
The blue line on this graph shows the decline of the number of individuals living in institutional settings to less than 1,500. The red line represents the growth in the provision of community services. This is a good pattern and shows that we have made significant progress. However, as we have shifted services out of institutions and into the community, OPWDD’s administrative and fiscal structures have also stayed tied to our institutional past. There remains much room to better integrate individuals into their communities.
OPWDD’s data systems are not person-centered. Its financial systems are focused more on provider agency needs than on individuals’ needs, and the administrative structure no longer make sense. The People First Waiver is an opportunity to redesign these systems to be more responsive to individual and family needs.

Another reason we have to reevaluate our current system is that the cost of delivering service is rising faster than other costs.
OPWDD is seeing an increasing number of people seeking services from our system – a growth rate of almost three percent annually on average.

OPWDD data are indicating that the percent of individuals being served that are over 50 years old, and those with multi-system or complex service needs, has been steadily growing for the past several decades.

We have also been seeing an increasing rate of diagnoses of autism spectrum disorders (ASDs), something which is happening across the country. Right now, ASDs are among the fastest growing developmental disabilities in New York State. The proportion of people with ASDs who receive OPWDD services has increased nearly five-fold from only three percent in 1989 to more than 17 percent in 2010.

This slide illustrates another challenge that we face as a system. The cost per person for individuals who are 50 years old or older is much higher than those associated with the younger population.

It is a success that our population is living longer than ever, but with the growing number of seniors, we need to make sure our system is financially sustainable.

We need to spend money in smarter ways by successfully coordinating care to improve outcomes for individuals and avoid high-cost services, such as hospitalizations.
This slide shows that the per person Medicaid expenditure for people with developmental disabilities exceeds the national average and that of comparable states.

While New York stands out as a leader in meeting the needs of individuals with developmental disabilities, we can probably use the money we spend more effectively.
When we have asked people what they want, we have learned that many would like to live somewhere else.

Data indicate that there may also be other changes we can make in the current system that would allow people to live less restricted lives.
As outlined in the concept paper, the People First waiver demonstration will:

- Address infrastructure adequacy by creating “no wrong door”;
- Improve opportunities for choice and community participation; and
- Enhance quality.

Ultimately, it will lead to a system that performs better for individuals with developmental disabilities.

Some people have asked, “What is the relationship between this waiver and the state’s Medicaid redesign initiative?”

The answer is: The People First Waiver would be happening without the Medicaid Redesign Team (MRT), but the recommendations made by the MRT will influence what we are doing.

Our goal will be to achieve a “good” care management model that effectively supports the needs of individuals and leads to improved personal outcomes for the individuals we serve.
Development of the waiver application will be a collaborative process involving many different parties representing the public and private sectors as well as people with developmental disabilities and their family members.

A Steering Committee will oversee and advise the overall application development.

Design teams will explore key elements of the system reforms, and will create distinct, targeted technical workgroups within their subject areas that will examine critical technical areas in significant detail.

All groups will include diverse perspectives by way of including individuals with developmental disabilities, family members and advocates, State agency staff and leaders, as well as experts from the private and nonprofit sectors with experience in fields such as behavioral health, long-term care, health care, and service provision.

OPWDD will work with all of its stakeholders to develop an implementation plan for the People First Waiver that will clearly prescribe an orderly transition from the current waiver to the new waiver.

The transition plan will be made public.

Extensive communication will accompany every phase of the transition.
Public participation in the development of the People First Waiver is required by CMS and is critical to ensuring that the system improvements contained in the waiver are shaped by those who receive OPWDD services.

The intent of the public participation plan is to collect input from a wide range of parties and to make the waiver application process as transparent to the public as possible.

The public participation plan will provide a variety of ways (electronic, phone, and in-person) for the public to submit comments and questions about the People First Waiver. It will make the results of these outreach mechanisms available to the public.

We are here today to collect your input regarding the development of the waiver application.

The input received today will be posted on the People First Waiver Web page.

Public Participation Plan

- A wide-reaching and multi-faceted solicitation of public input to help shape the final waiver application
- A transparent application design process accessible to the public via a detailed People First Waiver Web page
- Mechanisms for gathering public input:
  - Multiple listening sessions
  - Larger, more formal public forums
  - Online solicitation of comments and suggestions
- For more information on public participation and Steering Committee membership, please visit: www.opwdd.ny.gov/2011_waiver

Today’s Public Comments

Goals

To gather input regarding the future structure of our service system through the use of four discussion questions
To hear from as many people as possible
To work together to build a foundation for future work on the 1115 waiver
During April and May, we conducted listening sessions at locations across New York State. Commissioner Burke met with individuals with developmental disabilities and family members to discuss what they think is most important to improve within the OPWDD service system. (Note: The results of these listening sessions are now summarized and posted on the People First Waiver Web page.

Also during May, the OPWDD 1115 Waiver unit, working with the Department of Health and Governor Andrew Cuomo’s staff, invited experts representing relevant areas of expertise to participate on the Steering Committee and create a plan for key design teams. Throughout the summer months, the Steering Committee and the Design Teams will meet to explore key reform initiatives. The Design Teams will make recommendations to the Steering Committee that will shape the content of the waiver application and the structure and function of service delivery within the waiver.
The People First Waiver Web page will serve as the informational hub throughout the waiver development process. This site will provide information on meeting schedules, team membership, public comment, and application development.

A listserv function will allow interested parties to receive notices of updates to the People First Waiver Web page.